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Request For Continued Examination (RCE) Transmittal Address to:	Application Number	09/971,080		
	Filling Date	October 3, 2005		
	First Named Inventor	Hitesh Shah		
	Art Unit	2643		
Mall Stop RCE Commissioner for Patents	Examiner Name	Duc Minh N	Vguyen	
P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket Number	006004.00	004	
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.				
Submission required under 37 C.F.R. 1.114 Note: If the RCE is proper, any previously filed unentered amendments end amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).				
a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.				
Consider the arguments in the Appeal Brief or Reply Brief previously filed on Other				
b. , 🛛 Enclosed L. 🖾 Amendment/Repty II 🔲 Affidavit(e)/Declaration(s)	I, Amendment/Repty III. Information Disclosure Statement (IDS)			
2. Miscellaneous				
B. Suspension of action on the above-identified application is requested under 37 C.F.R. 1,103(c) for a period ofmonths. (Period of suspension shall not exceed 3 months: Fee under 37 C.F.R. 1,17(l) required)				
b. Other				
3. Feet The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filled. a. It The Director is hereby authorized to charge the following fees, or credit any overpayments, to				
Deposit Account No. 19-0733. I have enclosed a duplicate copy of this sheet.				
I. 🔀 RCE fee required under 37 C.F.R. 1.17(a) II. 🔲 Extension of time fee (37 C.F.R. 1.136 and 1.17)				
M Other				
b. Check in the amount of \$enclosed c. Payment by credit card (Form PTO-2039 enclosed)				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Signature Thomas J. Luca	Date		October 24, 2005	
Name (Print /Type) Thomas L. Evans	Registration No. (Attorney/Agent)		35,805	
CERTIFICATE OF MAILING OR TRANSMISSION				
I hereby certify that this correspondence to being facelimite transmitted to the United States Patent and Trademark Office at (571) 273-8300, on the date specified below.				
Signature Morman X. Lucas				
Name (Print /Type) Thomas L. Evane	Date Octob	October 24, 2005		
his collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which to the (and by the JSPTO to process) on application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12.				

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the complete depilication form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND Test. Sent Complete the form and/or suggestions for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.